

THE CONVENTION ON HUMAN RIGHTS AND BIOMEDICINE

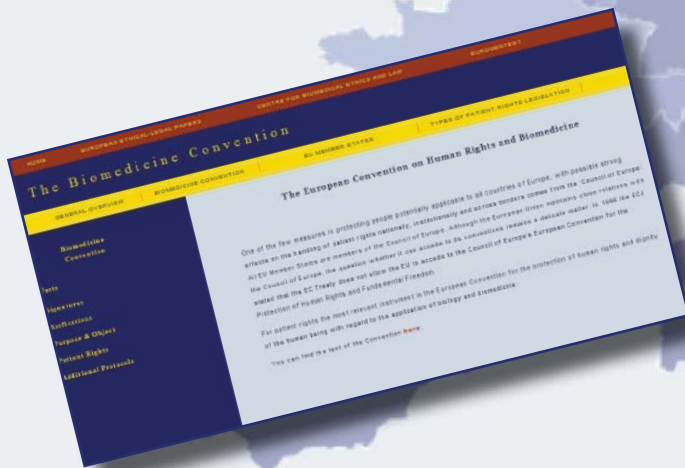
This section provides information on the Convention on Human Rights and Biomedicine itself. Also the text of the Convention can be found here.

Several facts concerning the Convention are explained. Through a table it is made clear which EU Member States have already signed and which have ratified the Convention and when they signed and/or ratified.

The purpose and objects of the Convention are mentioned.

An overview is given of the different patient rights protected by the Convention itself.

And also the different additional protocols are listed, together with a table showing which EU Member States are party to these protocols.



EU-MEMBER STATES: NATIONAL PATIENT RIGHTS LEGISLATION

The 27 EU Member States are divided into three groups: the Member States which have signed and ratified the Convention (13), the Member States which have signed, but not yet ratified the Convention (8) and the Member States which did not sign, nor ratify the Convention (6). For each individual EU Member State information is available on the national legislation on the protection of patient rights.

This information can be found in the following categories: general information, the right to informed consent, the right to information about his/her health, the rights regarding the medical file, the right to privacy, the right to complain and compensation and the rights of users of genetic services.

If a certain right is regulated extensively in the national legislation, this right will also be worked out more extensively.

If available, also a link can be found to an english translation of the national patient rights legislation.

TYPES OF PATIENT RIGHTS LEGISLATION

The national patient rights legislation through the European Union shows several similarities.

Therefore it is possible to categorize these national patient rights laws into three groups:

1. Special (single patient rights law) versus Split (rights embedded in different laws)
2. Horizontal (Civil Law) versus Vertical (Public Law) approach. In the Horizontal Approach a further distinction is made between “Legal” (well defined actionable rights) and “Quasi-legal” rights (obligation imposed on healthcare providers).
3. “The nominate treatment contract model” (‘treatment contract’ as specific contract for services) versus “the innominate treatment contract model” (no specific treatment contract as a contract for services).

